

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

091769404

FILING DATE

APPLICATION

CLAIMS					
BEFORE		AFTER THE AMENDMENT		AFTER THE AMENDMENT	
INCL.	DEPR.	INCL.	DEPR.	INCL.	DEPR.
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					
35					
36					
37					
38					
39					
40					
41					
42					
43					
44					
45					
46					
47					
48					
49					
50					
TOTAL REQ.	12	0	4	0	0
TOTAL DEPR.	12	0	4	0	0
TOTAL CROSS	12	0	4	0	0

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS